



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov

BIBDATASHEET**CONFIRMATION NO. 7872**

Bib Data Sheet

SERIAL NUMBER 08/927,022	FILING DATE 09/10/1997 RULE	CLASS 707	GROUP ART UNIT 2171	ATTORNEY DOCKET NO. INF-009	
APPLICANTS STEVEN T KIRSCH, LOS ALTOS, CA; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/23/1998					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY CA	SHEETS DRAWING 1	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
ADDRESS THOMAS SCHNECK P O BOX 2-E SAN JOSE , CA 951090005					
TITLE DOCUMENT RETRIEVAL SYSTEM WITH ACCESS CONTROL					
FILING FEE RECEIVED 790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 7872

SERIAL NUMBER 08/927,022	FILING DATE 09/10/1997 RULE	CLASS 707	GROUP ART UNIT 2175 2165	ATTORNEY DOCKET NO. INF-009	
APPLICANTS STEVEN T KIRSCH, LOS ALTOS, CA; ** CONTINUING DATA ***** <u>NONE</u> <u>N/A</u> ** FOREIGN APPLICATIONS ***** <u>NONE</u> <u>N/A</u> IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/23/1998					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Allowance <u>Signature</u> <u>Initials</u> Acknowledged Examiner's Signature		STATE OR COUNTRY CA	SHEETS DRAWING 1	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
ADDRESS THOMAS SCHNECK P O BOX 2-E SAN JOSE , CA 951090005					
TITLE DOCUMENT RETRIEVAL SYSTEM WITH ACCESS CONTROL					
FILING FEE RECEIVED 790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		